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Total # of Pages 9(including this page)

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From : Stephen E. Reiter	SR
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MESSAGE:

U.S. Patent Application No. 10/066,285

Following are:

- 1) Request for Continued Examination (RCE) Transmittal, in duplicate (8 pgs.)

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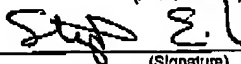
NO. 2359 P. 2

MAR 04 2005

Atty. Dkt. No. CentMed.020A (074066-0115)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Gregory M. Fahy et al.
Title: POLYGLYCEROL AND
LACTOSE COMPOSITIONS
FOR THE PROTECTION OF
LIVING SYSTEMS FROM
STATES OF REDUCED
METABOLISM

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below. Stephen E. Reiter (Printed Name)  (Signature) March 4, 2005 (Date of Deposit)

Appl. No.: 10/066,285
Appl. Filing Date: 02/01/2002
Examiner: Sandra E. Saucier
Art Unit: 1651

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

In re application of
Gregory M. Fahy et al.
Application No.: 10/066,28
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Atty. Dkt. No. CentMed.020A (074066-0115)

1. Submission required under 37 C.F.R. §1.114: (check items that apply)

a. Previously submitted:

- ☒ Please enter and consider the amendment/reply previously filed on February 16, 2005.
- ☐ Please consider the Affidavit(s)/Declaration(s) previously filed on ___ but not considered.
- ☐ Please consider the arguments in the Appeal Brief or Reply Brief under 37 C.F.R. § 1.116 previously filed on ___.
- ☐ Other ___.

b. Enclosed are:

- ☐ Amendment/Reply.
- ☐ Affidavit(s)/Declaration(s).
- ☐ Information Disclosure Statement.
- ☐ Form PTO-1449 with copies of ___ listed reference(s).
- ☐ Other .

Miscellaneous:

- ☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ___ months.

In re application of
 Gregory M. Fahy et al.
 Application No.: 10/066,28
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Atty. Dkt. No. CentMed.020A (074066-0115)

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$790.00	= \$790.00
Total Claims:	8	- 38	= 0	x \$50.00	= \$0.00
Independents	1	- 4	= 0	x \$200.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$360.00	= \$0.00
CLAIMS FEE TOTAL:					= \$790.00

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the
 total number of months checked below:

<input checked="" type="checkbox"/> Extension for response filed within the first month:	\$120.00	1	\$120.00
<input type="checkbox"/> Extension for response filed within the second month:	\$450.00		\$0.00
<input type="checkbox"/> Extension for response filed within the third month:	\$1,020.00		\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,590.00		\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,160.00		\$0.00
EXTENSION FEE SUBTOTAL:			\$120.00
EXTENSION FEE ALREADY PAID:			- \$120.00
EXTENSION FEE TOTAL			\$0.00
CLAIMS AND EXTENSION FEE TOTAL:			\$790.00
<input checked="" type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):			\$395.00
<input type="checkbox"/> Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
TOTAL FEE:			\$395.00

☒ Please charge Deposit Account No. 50-0872 in the amount of \$395.00. A duplicate copy
 of this transmittal is enclosed.

In re application of
Gregory M. Fahy et al.
Application No.: 10/066,28
Page 4 of 4

Atty. Dkt. No. CentMed.020A (074066-0115)

- ☐ A check in the amount of \$395.00 to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: March 4, 2005

By 

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Customer Number: 30542
Telephone: (858) 847-6711
Facsimile: (858) 792-6773

Stephen E. Reiter
Attorney for Applicant
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